

IFW 3738  
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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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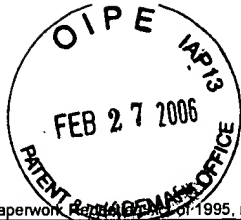
|   |    |                        |                |
|---|----|------------------------|----------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) |    | Application Number     | 09/446,629     |
|   |    | Filing Date            | March 23, 2000 |
|   |    | First Named Inventor   | Razi VAGO      |
|   |    | Art Unit               | 3738           |
|   |    | Examiner Name          | H. Phan        |
| Total Number of Pages in This Submission  | 10 | Attorney Docket Number | 229752001000   |

**ENCLOSURES (Check all that apply)**

|  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment/Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):<br><br>Return Receipt Postcard |
| <div>Remarks</div>   |   |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                         |          |        |
|--------------|-------------------------|----------|--------|
| Firm Name    | MORRISON & FOERSTER LLP |          |        |
| Signature    |                         |          |        |
| Printed name | Barry E. Bretschneider  |          |        |
| Date         | February 27, 2006       | Reg. No. | 28,055 |



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|   |  |                          |                     |              |
|---|--|--------------------------|---------------------|--------------|
| <b>FEE TRANSMITTAL</b><br>For FY 2005<br><br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | <b>Complete if Known</b> |                     |              |
|   |  | Application Number       | 09/446,629          |              |
|   |  | Filing Date              | March 23, 2000      |              |
|   |  | First Named Inventor     | Razi VAGO           |              |
|   |  | Examiner Name            | H. Phan             |              |
| TOTAL AMOUNT OF PAYMENT (\$)  |  | 225.00                   | Attorney Docket No. | 229752001000 |

**METHOD OF PAYMENT** (check all that apply)

|   |   |                                      |                               |   |
|---|---|--------------------------------------|-------------------------------|---|
| <input type="checkbox"/> Check  | <input type="checkbox"/> Credit Card  | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account   | Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u> |                                      |                               |   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |                                      |                               |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee               |                                      |                               |   |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                                     |                                      |                               |   |

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

| Total Claims  | Extra Claims | Fee (\$)              | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|-----------------------|---------------|---------------------------|----------|---------------|
| _____         | _____        | _____ x _____ = _____ | _____         | _____                     | _____    | _____         |
| Indep. Claims | Extra Claims | Fee (\$)              | Fee Paid (\$) |                           |          |               |
| _____         | _____        | _____ x _____ = _____ | _____         |                           |          |               |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof              | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|---|----------|---------------|
| _____        | _____        | _____ / 50 _____ (round up to a whole number) x _____ = _____ | _____    | _____         |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1252 Extension for response within second month 225.00

|                     |                        |                                   |                                 |
|---------------------|------------------------|-----------------------------------|---------------------------------|
| <b>SUBMITTED BY</b> |                        |                                   |                                 |
| Signature           |                        | Registration No. (Attorney/Agent) | 28,055 Telephone (703) 760-7743 |
| Name (Print/Type)   | Barry E. Bretschneider | Date                              | February 27, 2006               |